

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000001769

**Entity Name:** RAINBOW OF HOPE, INC.

**Current Principal Place of Business:**

11410 LINCOLN BLVD  
MIAMI, FL 33176

**Current Mailing Address:**

11410 LINCOLN BLVD  
MIAMI, FL 33176

**FEI Number:** 65-1130207

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PYFROM, ANNESIA O  
11410 LINCOLN BLVD  
MIAMI, FL 33176 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            CEO  
Name            MALONE, CARLOS LSR  
Address        11410 LINCOLN BLVD  
City-State-Zip: MIAMI FL 33176

Title            DIR  
Name            JOHNSON, STEPHANYE  
Address        11410 LINCOLN BLVD  
City-State-Zip: MIAMI FL 33176

Title            DIR  
Name            CRIBBS-LORRANT, TERRANCE  
Address        11410 LINCOLN BLVD  
City-State-Zip: MIAMI FL 33176

Title            DIR  
Name            PENDERGRASS, JACQUA  
Address        11410 LINCOLN BLVD  
City-State-Zip: MIAMI FL 33176

Title            DIR  
Name            FLOREZ, JOANA  
Address        11410 LINCOLN BLVD  
City-State-Zip: MIAMI FL 33176

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CARLOS L. MALONE, SR.

**CEO**

**04/29/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date